

United States Patent and Trademark Office
- Sales Receipt -

01/10/2006 DWILLIA1 00000001 500348 10789956

01 FC:1801 790.00 DA

Certificate of Facsimile Transmission
I hereby certify that this correspondence is being facsimile transmitted to
the Patent and Trademark Office, (571) 273-8300.

on December 16, 2005 by Mina Center

Signed Mina Center

RECEIVED Docket No. SHE0081.00
CENTRAL FAX CENTER

DEC 16 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Mary J. BOSSARD et al.

Examiner: Robert B. MONDESI

Serial No.: 10/789,956

Art Unit: 1653

Filed: February 26, 2004

Title: POLYMER-FACTOR VIII MOIETY CONJUGATES

**SUBMISSION UNDER 37 C.F.R. §1.114
INCLUDING AMENDMENT AND REMARKS**

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

Pursuant to the accompanying Request for Continued Examination (RCE), this submission is responsive to the final Office Action mailed June 16, 2005, and subsequent Advisory Action mailed September 8, 2005, each of which was received in connection with the above-identified patent application. As the final Office Action set a three-month shortened statutory period for reply (thereby setting a nominal due date of September 16, 2005), the present Submission is timely as Applicants include herewith a request for a three-month extension pursuant to the provisions of 37 C.F.R. §1.136(a), thereby extending the due date by three months, to December 16, 2005.

(This space intentionally left blank.)

12/19/2005 MBINAS 00000034 500348 10789956
01 FC:1202 50.00 DA

Serial No. 10/789,936
Docket No. SHE0081.00

If a telephone conference would expedite the prosecution of the subject application, the Examiner is requested to call the undersigned at (650) 620-5506.

Respectfully submitted,
Nektar Therapeutics

Date: December 16, 2005

By:

Mark A. Wilson
Mark A. Wilson
Registration No. 43,275

Nektar Therapeutics
150 Industrial Road
San Carlos, CA 94070
(650) 631-3100 (Telephone)
(650) 631-3125 (Facsimile)

PTO/SB/17 (12-04v2)

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

Approved for use through 07/31/2008. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Effective on 12/08/2004
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 50.00

Complete if Known

Application Number 10/789,956
Filing Date February 26, 2004
First Named Inventor Mary J. Bossard et al.
Examiner Name Robert B. Mondesi
Art Unit 1653
Attorney Docket No. SHE0081.00

RECEIVED
CENTRAL FAX CENTER

DEC 16 2005

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):
☒ Deposit Account Deposit Account Number: 500348 Deposit Account Name: NEKTAR THERAPEUTICS

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-203a.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | 0.00 |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| Fee Description | Fee (\$) | Small Entity Fee (\$) |
|--|----------|-----------------------|
| Each claim over 20 (including Reissues) | 50 | 25 |
| Each independent claim over 3 (including Reissues) | 200 | 100 |
| Multiple dependent claims | 360 | 180 |
| Total Claims 63 x 20 or HP = 1 x 50.00 = 50.00 | | |
| HP = highest number of total claims paid for, if greater than 20. | | |
| Indep. Claims 3 x 3 or HP = 0 x 200 = 0.00 | | |
| HP = highest number of independent claims paid for, if greater than 3. | | |

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets 150 - 100 = 50 / 50 = 1 (round up to a whole number) x 250.00 = 250.00

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):

SUBMITTED BY

Signature Mark A. Wilson Registration No. 43,275 Telephone 650-620-5506
Name (Print/Type) Mark A. Wilson Date December 16, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.